U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 12095	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Richard Ward	Name IRON WORKERS AFL-CIO		
	Labor Organization File Number 000 - 052		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 5964 Dayton Blvd	Street 1750 New York Avenue, N.W.		
City Chattanooga	City Washington		
State Tennessee ZIP Cods + 4 37415	State District of Columbia ZIP Code + 4 20006		
5. Position in labor organization. 6th General Vice President	<u>:</u>		
Enter appropriate data below if, during the past fiscal year, you or your (except as specified in the A. Held an interest in, engaged in transactions (including loans) with monetary value from an employer whose employees your organic	r spouse or minor child directly or indirectly had any of the following interests exclusions set forth in the instructions):		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	7.b. Amount.		
City			
State ZIP Code + 4			
	Signature		
15. Signature and verification. The undersigned declares, under penal submitted in this report (including the information contained in any accomundersigned's knowledge and belief, true, correct, and complete. (See the	lty of Perjury and other applicable ponalties of the law, that all of the information npanying documents), has been examined by the signatory and is, to the best of the he section on penalties in the instructions.)		
Signed <u>R.J. Ward</u>	On 8-11-05 4938701987 Date Telephone Number		
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Name of Person Filing Richard Ward	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name National Erectors Association/Segalco	X a. Labor Organization				
Trade Name, if any:	b. Trust				
P.O. Box, Bidg., Room No., if any	c. Employer				
Street 1501 Lee Highway, Suite 202					
City Arlington					
State Virginia ZIP Codo + 4 22209-1104					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name	National Erectors Association - an association with interest and concern about the construction industry. Segalco - Firm that performs services for				
Trade Name, if any:	related pension plans. Monetary dealings with this firm listed below.				
P.O. Box, Bidg., Room No., if any					
Street	11.b. Approximate dollar value of such dealing. \$58,660				
City	12.a. Nature of interest held or income received.				
State ZIP Code + 4	Reception				
	12 b. Amount. \$156				
	12.b. Amount. \$156				
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	er parts A and B above)				
C. Received from any employer (other than an employer covered und or from any tabor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	er parts A and B above)				
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	er parts A and B above) y or other thing of value.				
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	er parts A and B above) y or other thing of value.				
or from any tabor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	er parts A and B above) y or other thing of value.				
or from any tabor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	er parts A and B above) y or other thing of value.				
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	er parts A and B above) y or other thing of value.				

14.b. Amount of payment.

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or Consultant

13.b. Is the Business an Employer

Name of Person Filing Richard Ward	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or					
(2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9, Business deals with:				
Name Nat'l Council of Erectors, Fabs & Riggers	X a. Labor Organization				
Trade Name, if any: NCEFR	b. Trust				
P.O. Box, Bidg., Room No., if any P.O. Box 280 Street 10382 Main Street	c. Employer				
City Fairfax			Ì		
State Virginia ZIP Code + 4 22030					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Association with interest and concern about the				
Name	Association with 1 construction indus	try.			
Trade Name, if any:			·		
P.O. Box, Bidg., Room No., if any					
Street	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.				
City					
State ZIP Code + 4	Reception				
	:				
	12.b. Amount.		\$90		
C. Received from any employer (other than an employer covered und	er parts A and B above)				
or from any labor relations consultant to an employer any payment of mone	14.a. Nature of payment				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Hattile of paymont				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					

14,b. Amount of payment.

or Consultant

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13.b. Is the Business an Employer

Name of Person Filing Richard Ward	File Number U-		
B. Held an interest in or derived income or economic penalit with monetary substantial part of which consists of buying from, selling or leasing to, or of an employer whose employees your labor organization represents or is a (2) any part of which consists of buying from or selling or leasing directly or dealing with your labor organization or with a trust in which your labor organization.	herwise dealing with the business actively seeking to represent, or indirectly to, or otherwise		
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name IMPACT	X a. Labor Organization	X a. Labor Organization	
Trade Name, if any:	b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street 1750 New York Avenue, NW, NW Lobby			
City Washington			
State District of Columbia ZIP Code + 4			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	Receives contributions from Emplo collective bargaining contracts w \$4,519,541. IMPACT leases office	ith local unions -	
Trade Name, if any:	from Iron Workers-\$1,057,284		
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing.	\$5,576,285	
City	12.a. Nature of interest hold or income received		
State ZIP Code + 4	ZIP Cods + 4		
	12 h Amount	\$107	
	12.b. Amount.		
C. Received from any employer (other than an employer covered or from any labor relations consultant to an employer any payment of me	under parts A and B above) oney or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment		

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). 9. Business deals with: Name IMPACT X a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 1750 New York Avenue, NW, NW Lobby Washington City State District of Columbia ZIP Code + 4 11.a. Nature of such dealing. 10, if 9.b. or 9.c. is checked give trust or employer's name Receives contributions from Employers who have collective bargaining contracts with local unions -Name \$4,519,541. IMPACT leases office space & employees from Iron Workers-\$1,057,284 Trade Name, if any: P.O. Box, Bidg., Room No., if any Street \$5,576,285 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. City 06/16/04 - New Orleans Regional Advisory Board -ZIP Code + 4 State Food & Drinks

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4 State 14.b. Amount of payment. ? 13.b. Is the Business an Employer or Consultant

12.b. Amount.

\$123